

Family questions inmate care

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By ROB JOHNSON
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Edward Corley's death was an especially bleak one.

A paraplegic inmate serving three life sentences — one for murder and two for a 1986 prison break that he managed to stage in his wheelchair and a hijacked ambulance — Corley died after emergency surgery last year.

According to autopsy reports and to the federal lawsuit that his surviving daughter filed this month, Corley's flesh had begun to decay. The medical staff at Lois DeBerry Special Needs Facility, the prison system's special health-care unit, finally sent him to Nashville General Hospital, where surgeons tried to excise the dead flesh. But 49-year-old Corley soon died after suffering a heart attack.

His daughter contends that the gangrene that contributed to Corley's fatal heart attack was the result of a repeated failure of Tennessee prison health officials to give her father a clean supply of colostomy bags.

The Davidson County medical examiner's office couldn't find a definite cause of death, but found that Corley probably died of complications of injuries associated with his paraplegia.

Other critics of the state prison health-care system, including a prominent Nashville attorney and a pair of his inmate clients, contend that medical care can be unresponsive and life threatening.

Quenton White, state commissioner of correction, countered these statements, saying that he is "convinced that the level of care provided to these inmates met the standard that is reasonably expected. However, the medical privacy laws prohibit us from going into detail on any of these cases."

"It is also our policy not to comment on cases that are currently in litigation," White said. "Once the facts are made public in court, it should give people a clearer perspective of what happened. The goal of this department is to ensure that the delivery of health care is reasonable and humane."

Inmate health care has been provided since 2001 by Correctional Medical Services, a Missouri-based corporation. The contract is worth approximately \$26 million a year. The corporation is not named as a defendant in the Corley lawsuit.

The state houses many of its mentally ill inmates and those requiring acute or convalescent care at DeBerry. The prison stands next to Riverbend Maximum Security Institution on Nashville's western fringes.

It is part medical ward, part nursing home, part psychological unit for Tennessee's prison population and currently has a population of about 750 inmates behind its concrete walls and rows of concertina razor wire.

One of those inmates is Terry Crouch, who was convicted 17 years ago for a Cheatham County homicide.

Beginning in 2002, Crouch spent a year telling prison physician's assistants that he was suffering debilitating headaches and blurred vision. He couldn't keep his food down and was losing weight "like it was water running off of me," he said. The medical staff conducted tests on his gastrointestinal systems and kept feeding him over-the-counter antacids.

A year later, he said, doctors dropped their resistance to a brain scan that Crouch's mother had long sought. The scan found a brain tumor the size of a half-dollar pressing on Crouch's pituitary gland and optic nerve.

Crouch, 35, attributes his nick-of-time diagnosis to pressure from a family friend, his mother and Nashville attorney David Raybin, who pressed the prison health-care contractor to perform the tests and follow-up care that Crouch's family had suspected for months that he needed.

To relieve the pressure on his brain, surgeons at Skyline Medical Center inserted a shunt inside his skull.

Soon after that, though, a blood vessel burst inside his brain, requiring an immediate operation. The surgery repaired the vessel but has left Crouch with a startling divot in his head.

He has been returned to Lois DeBerry Special Needs to regain part of his strength and the 90 pounds he had lost over the past year so he can endure another surgery, now scheduled for Friday, to remove the nonmalignant tumor from his brain.

He said the surgery scares him, but he's pleased that doctors have finally found the cause of his symptoms.

"The headaches have stopped. I'm back up to 220 pounds now," Crouch said. For that, he's happy. "But the attitude for so long was 'I'm going to treat your symptoms. I'm not going to treat your problem.' "

Raybin said prison medical staffers are reluctant to treat medical conditions, waiting often until it is almost too late.

"It is an absolute miracle that this man did not die," he said in a letter to Robert Waller, the newly appointed warden at Lois DeBerry.

Another inmate, Ronald Agee, complains that he doesn't get the level of care he needs for the rheumatoid arthritis that has swollen his wrists and at times has put him in a wheelchair. He also suffers from hepatitis C, a blood-borne disease that is running rampant in the nation's prisons.

The Nashville man and current DeBerry inmate said he knows prison inmates aren't the most sympathetic people in the public's eyes.

"I'm going to do my time for the crime," said the former nightclub owner, who was convicted on a drug conspiracy charge.

"And when I was on the street, I know I paid a lot in taxes. But if they're going to cage us, they at least need to take care of us. People need to understand that maybe their sons or their daughters or aunts and uncles could end up in here."

Corley, with his three life sentences, not surprisingly ended up dying while he was a prisoner of the state.

But his family argues that he died much sooner than he needed to had he received adequate continuing care.

"The continuing treatment," the federal suit states, "probably would have saved his life."